DEADLINE:

Please return application & supplemental questionnaire in person or by U.S. Mail with a postmark on or before the

above date.

4:30 PM

FRIDAY

OCTOBER 08, 2004

City-County Employment Office

Your Telephone #	E-Mail	Date

ASSOCIATE ENGINEERING SPECIALIST

PUBLIC WORKS/UTILITIES - ENGINEERING SERVICES

Req. #04-0048-CI-1

SUPPLEMENTAL QUESTIONNAIRE

Name	Social Security #

Please allow 2 weeks from the closing date of this position before expecting to receive notice (one way or another) with regards to an interview.

PLEASE READ BEFORE COMPLETING:

The information you provide on this form will be used to further evaluate your training and experience as it relates to the position(s) for which you are applying. Be certain to include: paid employment, military history, volunteer experience, and any educational training and/or experience. NOTE: Please make certain that all employment history and education mentioned on this supplemental questionnaire also appear on your application. We screen all applications based upon the information you, the applicant, provide on these documents only. We do not refer to resumes.

This questionnaire is a supplement to your application and is made a part there of and subject to all terms and conditions noted on the Application for Employment. Remember, you are responsible for the completeness and accuracy of this form as well as the application. Incomplete or omitted information on either of the documents could result in you, the applicant, not receiving full credit for your experience. So please, be as detailed as possible.

CRIMINAL HISTORY CHECKS WILL BE MADE ON TOP CANDIDATES.

	ease indicate if you have college-level course work, training, or an associate's n the following:
	Computer Science Course work Training Associate's degree None
Lis	courses completed: EXPLAIN:
1-3.	Drafting
	Course work Training
	Associate's degree None
Lis	courses completed: EXPLAIN:
	

1-4.	Engineering
	Course work
	Training
	Associate's degree
	None
Lis	t courses completed:
	EXPLAIN:
	,
1-5.	Electrical/Electronic field
	Course work
	Training
	Associate's degree
	None
Lls	t courses completed: EXPLAIN:
	EAPLAIN:
	
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1-6.	Related field
	Course work
	Training
	Associate's degree
	None
Lis	t related field and courses completed. EXPLAIN:
	EAPLAIN:

2-1. Please indicate if you have experience in the following:

2-2. Software installation/upgrade troubleshooting
☐ Yes ☐ No
If yes, please list employers and describe your experience. EXPLAIN:
2-3. Drafting
☐ Yes ☐ No
If yes, please list employers and describe your experience. EXPLAIN:
2-4. Surveying
Yes
□ No
If yes, please list employers and describe your experience.
EXPLAIN:

2-5. Engineering	
Yes No	
If yes, please list employers and describe your experience. EXPLAIN:	
2-6. Electrical or electronic field	
If yes, please list employers and describe your experience.	
EXPLAIN:	
3-1. Do you have experience performing routine maintenance on traffic control devices	?
☐ Yes	
□ No	
If yes, please list employers, how long you performed these duties, and describe you experience.	
EXPLAIN:	

4-1.	Do you have experience installing and/or maintaining traffic signs? Yes No
	yes, please list employers, how long you performed these duties, and describe your erience. EXPLAIN:
5-1.	Do you have experience troubleshooting or repairing traffic signals? Yes No
	yes, please list employers, how long you performed these duties, and describe your erience. EXPLAIN:
	Please indicate if you have experience using the following test equipment:
	Yes No
]	If yes, please list employers and describe your experience. EXPLAIN:

	C Amp meter
Ye	S S
No	
	, please list employers and describe your experience. PLAIN:
. 0:	scilloscope
Ye	
No	
	
. Т	ime Domain Reflectometer
. Т: Үе	
Ye No yes	
Ye No yes	s , please list employers and describe your experience.
Ye No yes	s , please list employers and describe your experience.
Ye No yes	s , please list employers and describe your experience.
Ye No yes	s , please list employers and describe your experience.
Ye No yes	s , please list employers and describe your experience.

-6.	Megohmmeter
]	Yes
	No
	res, please list employers and describe your experience. EXPLAIN:
-7. -	
_	Yes
	No
	res, please list employers and describe your experience. EXPLAIN:
-8.	Cable Locator
_	
_	Yes No
	res, please list employers and describe your experience. EXPLAIN:

7-1. Do you have experience using personal computers, lab tops, notebooks, and/or hand hel computers?	d
☐ Yes ☐ No	
If yes, please list employers and describe your experience.	
EXPLAIN:	
8-1. Please indicate if you have experience using the following hand tools:	
8-2. Soldering Station	
☐ Yes ☐ No	
If yes, please list employers and describe your experience. EXPLAIN:	
8-3. Splicing Tool (i.e. Pic-A-Bond) Yes	
□ No	
If yes, please list employers and describe your experience. EXPLAIN:	
EAFLIAIN.	

8-4.	De-soldering Station
	Yes
	No
_	
Ιf	yes, please list employers and describe your experience.
	EXPLAIN:
8-5.	Chain Hoist and Grip
H	Yes
ш	No
тf	yes, please list employers and describe your experience.
11	EXPLAIN:
	EAPHAIN·
9-1. I	Indicate if you have experience repairing the following traffic signal equipment:
<i>)</i> 1. 1	indicate if you have experience repairing the forfowing traffic signar equipment.
9-2.	Controllers
, <u>, , , , , , , , , , , , , , , , , , </u>	
님	Yes
	No
Ιİ	yes, please note type:
	EXPLAIN:
	

_	Detector Amplifier
	Yes No
<u>—</u>	
If	yes, please note type: EXPLAIN:
	EAPLAIN ·
9-4.	Conflict Monitor
	Yes No
If	yes, please note type:
	EXPLAIN:
9-5.	Traffic Signal Head
	Yes
Ш	No
If	yes, please note type:
	EXPLAIN:
	This position requires good physical condition and sufficient strength and agility t
_	heavy manual tasks. Can you lift 50 lbs.?
☐ Ye	
110	

11-1 Is tl	. This position requires you to be on-call and work under adverse weather conditions. his a problem for you? Yes No
12-1	. Please indicate if you currently possess the following certifications. IMSA Certification ATSSA Certification No certification
If	. Do you have a valid Nebraska driver's license? Yes No yes, please list your driver's license number, date of issuance, expiration date, date of birth (for verification purposes). EXPLAIN:
14-1	. Do you possess a valid driver's license issued by another state? Yes No
	yes, please include the state, driver's license number, date of issuance, iration date, and date of birth (for verification purposes). EXPLAIN:

15-1. CRIMINAL HISTORYCHECKS will be conducted on the top applicants. PLEASE NOTE OUR POLICY. ALL convictions for any law violation (i.e., DUI, shoplifting, minor in possession, reckless driving, etc.) other than a minor traffic violation (i.e., parking ticket, speeding ticket), including convictions that have been set aside, probationed, or pardoned, must be listed on the application form or on an attached sheet. Consideration is given to the offense and its relationship to the position for which you are applying. Failure to list convictions will be considered to be falsification of your application and result in automatic rejection. [Lancaster County Personnel Rules 5.4(c) and Lincoln Municipal Code 2.76.230(d)].
In order to perform such checks, the Lincoln Police Department requires the following information.
Please list your last name, first name, middle name, date of birth, sex, and any other names by which you have been known (i.e. maiden name). EXPLAIN:
16-1. Have you listed on the application form ALL jobs and education described on this questionnaire? (NOTE: FAILURE TO LIST ALL JOBS AND/OR EDUCATION ON THE APPLICATION COULD BE CAUSE FOR REJECTION BASED ON INSUFFICIENT INFORMATION. A RESUME CANNOT BE USED AS A SUBSTITUTE. PLEASE CHECK YOUR APPLICATION AGAIN.) Yes No